



3623

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/042,899
		Filing Date	January 8, 2002
		First Named Inventor	Joe Freeman Britt, Jr
		Art Unit	3623
		Examiner Name	Catherine Michelle Tarae
Total Number of Pages in This Submission	34	Attorney Docket Number	4676P020

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Return postcard (1)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> PTO/SB/08	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Basic Filing Fee		
<input type="checkbox"/> Declaration/POA		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Robert B. O'Rourke, Reg. No. 46,972 BLAKELY SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	2/21/07

### CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Carla Vignola
Signature	
Date	18-21-07



# **EE TRANSMITTAL for FY 2006**

*Patent fees are subject to annual revision.*

Applicant claims small entity status. See 37 CFR 1.27.

**TOTAL AMOUNT OF PAYMENT** (\$ 0.00)

<i><b>Complete if Known</b></i>	
Application Number	10/042,899
Filing Date	January 8, 2002
First Named Inventor	Joe Freeman Britt, Jr
Examiner Name	Catherine Michelle Tarae
Art Unit	3623
Attorney Docket No.	4676P020

**METHOD OF PAYMENT** (*check all that apply*)

Check  Credit card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 02-2666      Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below

Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

Credit any overpayments

Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.

## **FEE CALCULATION**

## **1. EXTRA CLAIM FEES**

		Extra Claims	Fee from below	Fee Paid
Total Claims	14	20*	0	50.00
Independent Claims	2	3*	0	200.00
Multiple Dependent				=

Large Entity		Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	
1202	50	2202	25	Claims in excess of 20	
1201	200	2201	100	Independent claims in excess of 3	
1203	360	2203	180	Multiple Dependent claim, if not paid	
1204	790	2204	395	**Reissue independent claims over original patent	
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (1)</b>				<b>(1)</b>	<b>0.00</b>

*\*\*or number previously paid, if greater. For Reissues, see below*

## 2 ADDITIONAL FEES

## **2. ADDITIONAL FEES**

<b>Fee Code</b>	<b>Fee (\$)</b>	<b>Fee Code</b>	<b>Fee (\$)</b>	<b>Fee Description</b>
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet
2053	130	2053	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,590	2254	795	Extension for reply within fourth month
1255	2,160	2255	1,080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	500	Request for oral hearing
1451	1,510	2451	1,510	Petition to institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.

**Fee Paid**

**Other fee (specify)**

**SUBTOTAL (2)**

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SUBMITTED BY

**Complete (if applicable)**

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Robert B. O'Rourke	Registration No. (Attorney/Agent)	46,972	Telephone	(408) 720-8300
Signature				Date	8/21/07

Based on PTO/SB/17 (02-07) as modified by Blakely, Sokoloff, Taylor & Zalman (wlr) 02/26/2007.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



Attorney's Docket No.: 4676.P020

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Joe Freeman Britt, Jr.

Application No.: 10/042,899

Filed: January 8, 2002

For: AN APPARATUS AND METHOD  
FOR IDENTIFYING AND SURVEYING  
SUBSCRIBERS

Examiner: Cathrine Michelle Tarae

Art Group: 3623

Confirmation No.: 5830

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO OFFICE ACTION

Sir:

In response to the Office Action mailed May 21, 2007 for the subject patent application, please enter the following amendments and consider the following remarks.

FIRST CLASS CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the Untied Sates Postal Service as first class mail with sufficient postage in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on August 21, 2007

Date of Deposit

Carla Vignola

Name of Person Mailing Correspondence

Signature

8-21-07

Date